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The Impact of VO_2 and Cardiovascular Drift on Submaximal Exercise utilizing ACSM's Cycle Metabolic Equation

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Clinical exercise physiologists frequently utilize the American College of Sports Medicine's (ACSM) metabolic equations to prescribe exercise intensity for clinical (e.g. cardiac, pulmonary, etc.) populations. Oxygen uptake (VO_2) drift and cardiovascular drift have been demonstrated to be significant across fitness levels as exercise duration increases. **PURPOSE:** The purpose of the present study was to evaluate the impact of VO_2 drift and cardiovascular drift on sustained, submaximal exercise workloads based on VO_2 as predicted by ACSM's cycle equation. **METHODS:** The study consisted of 10 male and female subjects ages 23–58 who participated in sustained, submaximal cycle exercise for 20 min at an intensity equivalent to 60% of predicted VO_{2MAX} . Heart rate (HR) and VO_2 were monitored and recorded during the exercise sessions. **RESULTS:** Mean measured VO_2 at min 5 was 19.8 ± 1.2 mL \cdot kg \cdot min⁻¹, and mean measured VO_2 at min 20 was 20.6 ± 1.3 mL \cdot kg \cdot min⁻¹. Mean predicted VO_2 at min 20 was 21.8 ± 1.1 mL \cdot kg \cdot min⁻¹. There was a statistically significant difference between measured VO_2 at min 5 and measured VO_2 at min 20 ($p < 0.001$). There was a statistically significant difference between measured VO_2 at min 20 and predicted VO_2 at min 20 ($p = 0.004$) with predicted VO_2 lower compared to measured VO_2 . Mean measured HR at min 5 was 138 ± 4 bpm and mean measured HR at min 20 was 149 ± 4 bpm with a statistically significant difference ($p < 0.001$). **CONCLUSION:** Although oxygen drift was demonstrated for the subjects in the current study, the mean measured VO_2 at min 20 was lower than the predicted VO_2 at min 20. The ACSM prediction equation for cycle ergometry may still be an appropriate tool for use in the clinical population; however, HR and oxygen drift should be regularly monitored during exercise in this population.